## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571) 273-2885



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance fee notifications	the state of the s			h- 1 h- 4-4	, c. (c) increasing a sept		
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)				Note: A certificate of Fee(s) Transmittal. The papers. Each additional papers.	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
Dr Mark Friedman LTD c/o Bill Polkinghorn-Discovery Dispatch 9003 Florin Way Upper Marlboro, MD 20772				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
, ,		CRANCOLOR ST	<i>\$</i> /			(Depositor's name)	
		PERM				(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED II		NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/674,825	12/18/2000	· · · · · · · · · · · · · · · · · · ·	Karina Roz	hetsky	1659/3	5255	
TITLE OF INVENTION: CA	ARBOXYLIC CATIONITE	S AND METHODS (	OF MANUFA	ACTURE			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		\$0	\$700	03/21/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS	}		
LIPMAN, BERNARD		1713	1713 5			·	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the name or agents OR (2) the name registered at 2 registered plisted, no nar	For printing on the patent front page, list the names of up to 3 registered patent attorneys agents OR, alternatively, the name of a single firm (having as a member a gistered attorney or agent) and the names of up to egistered patent attorneys or agents. If no name is ted, no name will be printed.			
	RESIDENCE DATA TO B an assignee is identified be 37 CFR 3.11. Completion of	low, no assignee dat of this form is NOT a	ta will appear substitute for	on the patent. If an assign	nee-iscidentified below, the d	ocument has been filed for U9674825	
				: (CITY and STATE OR COUNTRY) 700.00 DA			
POLYGRAN	J LTD.	H	AIFA,	ISRAEL			
Please check the appropriate	assignee category or categor	ries (will not be printe	ed on the pate	ent): 🔲 Individual 💆 Co	orporation or other private gro	oup entity Government	
4a. The following fee(s) are enclosed: 4b. Payment of F							
Issue Fee	nall antity discount normitte		☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.				
☐ Publication Fce (No small entity discount permitted) ☐ Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number				
5. Change in Entity Status (	from status indicated above IALL ENTITY status. See		h Applican	t is no longer claiming SMA	LL ENTITY status. See 37 C	EP 1 27(a)(2)	
The Director of the USPTO is	s requested to apply the Issu	e Fee and Publication	n Fee (if any)	or to re-apply any previousl	y paid issue fee to the applications or the attorney or agent; or the	ation identified above.	
Authorized Signature				Date	1nr. 15.00		
Typed or printed name		IEDMAN	Registration No. 33, 883				
This collection of information in application. Confidentiality ubmitting the completed applies form and/or suggestions 30x 1450, Alexandria, Virgin 12321211	n is required by 37 CFR 1.3 y is governed by 35 U.S.C. blication form to the USPT for reducing this burden, sh nia 22313-1450. DO NOT	11. The information i 122 and 37 CFR 1.1 D. Time will vary de ould be sent to the C SEND FEES OR CO.	s required to 4. This collect pending upor hief Informat MPLETED F	obtain or retain a benefit by to tion is estimated to take 12 to the individual case. Any co- ion Officer, U.S. Patent and ORMS TO THIS ADDRESS	the public which is to file (and minutes to complete, includin mements on the amount of tin Trademark Office, U.S. Dep. S. SEND TO: Commissioner	I by the USPTO to process) ig gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.